

NHS Education for Scotland

Feedback, Comments, Concerns and Complaints Annual Report 2021-2022

September 2022

We are a national special NHS Board responsible for supporting health and social care services in Scotland by providing education, training and workforce development. NES also supports health and care providers through the development and maintenance of digital infrastructure. The summary table below precedes the full Feedback, Comments, Concerns and Complaints report and provides brief details of the complaints and expressions of concern we received between 1 April 2021 and 31 March 2022.

Table 1: Summary of complaints received and outcome 2021-22

Subject of complaint	Outcome of Complaint	Lessons learned	
Racial bias in recruitment process	Not upheld	 HR team to review pre-interview information shared with candidates Medicine & HR to review the ethnic disparities in medical educator recruitment. HR to review the post-interview feedback given to unsuccessful candidates 	
Inadequate allocation of medical training posts	Partially upheld	Improvements made to the national recruitment process	
Misspelt name on vaccination record	Not applicable	Record corrected	
Staffing at GP practice (member of public)	Not upheld	None	
5. Inaccurate content in NES resource	Not applicable	Content removed from website	
6. Incomplete vaccination record	Not applicable	Action taken and information corrected	
7. Unfair process for assessment of 'Satisfactory Completion'	Partially upheld	 Dental to review assessment guidance issued; improvements to Dental Assessment Unit processes NES Dental to consider establishing a formal appeals process for negative outcomes 	
8. Specialty trainee recruitment	Not applicable	Complainant signposted to appropriate national appeals process and given full background information	
9. Access to NES Dementia Care training	Upheld	Improved communication and transparency about eligibility for training	

10. Shetland missing from promotional map of	Upheld	Apology given and liaison with Corporate Communication team to
Scotland		ensure correct graphic used in future
11. Pharmacy application	Not upheld	Clarification given
12. Quality of Independent Prescribing course	Partially upheld	Apology and explanation given. Improvements made to the accessibility of materials.
13. Dental technology training	Not upheld	Information and explanation given.
CONCERN: Concern: inadequate training & bullying culture in Opthalmology training	Not applicable	Action taken over training. Signposted to local health board for bullying concerns.

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Introduction

Welcome to our annual report on feedback, comments, concerns and complaints for 2021-2022. The report is a requirement of the 2017 Patient Rights (Feedback, Comments, Concerns and Complaints (Scotland)) Directions which specifies that relevant NHS bodies should prepare an annual report at the end of each year summarising action taken as a result of feedback, comments and concerns received in that year.

The first part of the report provides summaries of our progress in collecting and using feedback from our service users. The summaries include case study materials to illustrate our diverse approaches to feedback collection and the difference this information has made to our work. Part 2 includes a summary of the complaints and concerns expressed by our service users during the year and the outcomes from these complaints. It also provides brief information regarding our progress in handling and learning from complaints in accordance with the nine indicators set out in the Scottish Government's guidance to health boards.

We have also included brief details about some of the positive feedback and comments received from our service users – including trainees and other health service staff.

Part 1. Feedback, Comments and Concerns

1. Methods for gathering and using feedback

All our services are planned, developed and reviewed in partnership with stakeholders, including health care professionals in training and other health and care staff who rely on NES educational support to provide excellent patient care. Our approach to collecting feedback focuses on the 'user experience' of our diverse training programmes and products, ensuring they are accessible and fit for purpose. We are aware that feedback on learner/service user satisfaction provides a key metric for the engagement of learners, which provides valuable predictive insight into the impact of our educational programmes and resources. Learner feedback is also essential in enabling us to improve the accessibility and quality of our training. The case studies featured in this report provide some examples of how feedback has been used to identify opportunities for improvement. The collection and use of learner feedback is a key focus for our quality management activities, which are monitored at senior levels within the organisation.

Feedback from health care professionals in training forms an essential component of our approach to quality management at NES. This feedback is invaluable in enabling us to evaluate educational quality, identify opportunities to improve learner experiences, and provide stakeholders with vital assurance that Scotland's significant investment in training for healthcare is effective. We organise regular feedback activities, such as the annual Scottish Training Survey in postgraduate medical education, or support UK surveys including the General Medical Council's annual Training Survey and the General Dental Council's annual surveys of Dental Foundation/Vocational Training and Dental Specialty Training. As described in section 5 below, the data collected through these trainee surveys is analysed closely and forms an important part of a rich dataset used to improve education quality.

In addition to our Educational Governance processes, a *Contact Us* page on our website provides an online form for feedback (positive or negative) about any aspect of our work. Further information, including examples of these processes and how we use feedback is provided below.

Case study 1: Psychology education and training

NES's Psychology team has a long track record of commissioning, supporting and delivering education and training for aspiring psychologists, psychology practitioners and other staff groups. This work requires the involvement of trainees, other learners, health and care staff and various organisations in the ongoing review and improvement of education programmes. The Psychology team involves these groups and collects their feedback using various methods, which have evolved over several years. During the reporting period Psychology colleagues used the following processes:

- The development of a single Training Acceptability Rating Scale (TARS) tool to collect feedback from learners attending training has promoted the efficient and consistent collection of feedback via an online Microsoft Form.
- Some workstreams have monitored the impact of their training and education using the Implementation Improvement Tracker Tool that is based on Implementation Science and has two functions:
- 1) Enabling staff to track the implementation of Psychological Therapies and Interventions in their area.
- 2) Provide feedback to NES on the impact of the training.

- NES supported trainers, supervisors and practitioners within the NHS Boards assist with gathering data to monitor impact. External infrastructure in the Boards such as Local tutors, Psychological Therapies Training co-ordinators (PTTCs) and others gather feedback from Boards regarding local training needs
- Pre and post measures of knowledge are used to identify that intended outcome measures have been achieved. As far as possible direct assessment of competence is included within the training and education provided by the Directorate.
- Applied programmes use a variety of methods to seek feedback from trainees including online tools and face-to-face meetings with whole year groups and trainee reps.

1.1 Our approaches to gathering and using feedback, including how we publicise opportunities for providing comments

Our service users play an important part in reviewing and improving education initiatives by providing informed feedback. In this respect learners and trainees are uniquely placed to provide expert insight into their experience. The development, commissioning and quality management of education and training is informed by stakeholder participation in consultation exercises, focus groups, reference groups, steering groups, programme boards, and the valuable feedback we elicit from learners, Health Boards and others. The importance we attach to this aspect of our work is reflected in our efforts to publicise and encourage feedback from learners and others involved in our work.

Across our extensive portfolio of education activities there are numerous examples of service users or learners participating in the ongoing review and enhancement of our programmes. This includes the following:

- Recruitment of doctors in training to assist in our Quality Management of training programmes
- Scottish Training Survey an opportunity for doctors in training to reflect on their training experience at the end of each posting.
- Notification of concern process for doctors in training Managed by the Deanery, this
 is process by which doctors in training, trainers or other staff can
 report concerns outwith the usual survey processes.
- Quality Management pre-visit questionnaires for trainers and doctors in training -Coordinated by the Postgraduate Medical Deanery within the six weeks before a quality management visit is conducted.
- Dental Care Professionals (DCP) Collection of feedback data from participants and employers following induction, study days and at the end of the programme.
- Pharmacy The use of focus groups to gather user insights on new e-learning modules and 'exit questionnaires' for learners completing education programmes. In addition to these feedback sources, the Pharmacy team embeds feedback tools on each e-learning resource to gather user views on completion.

Case study 1: The Trauma Informed Workforce

The Trauma Informed Workforce: Victims and Witnesses project enabled invaluable feedback about the Knowledge and Skills required by the justice workface from those people directly affected by these staff members. Their experiences were often distressing and the project needed to be carried out in partnership and with a high degree of sensitivity.

Case study 2: Continuing Professional Development for Healthcare Scientists

The NES Healthcare Scientists team organises and deliver a range of learning activities to support the continuous development of the diverse healthcare scientist groups working in Scotland. To ensure this development support meets the needs of staff and services the Healthcare Science team collects feedback and surveys the healthcare science community.

The most recent survey sent to healthcare scientists collected information regarding the preferred format of future NES events and asked about preferences for the themes and topics of future sessions. In terms of our evaluation forms, the team asks learners to rate both e-learning modules and interactive workshops, and to provide more detailed comments regarding what did/didn't work well.

1.2 How we publicise opportunities for providing comments

Given the importance of feedback for our work, we use several different methods to encourage comment from trainees and other learners. These range from targeted communications for training grades in Medicine, to the provision of an open comments mailbox for Health Care Science trainees and the use of social media to invite feedback from Pharmacists. In eliciting feedback, we observe the key principles of preserving the anonymity of individuals submitting comments and being prompt to act on specific suggestions. Where possible we provide named contacts for communications, but also offer generic contact email addresses.

Case study: Pharmacy Technicians (GP Learning Pathway and Foundation Training Framework)

The NES Pharmacy Technicians team collects a range of information from learners relating to a wide range of educational matters using questionnaires issued at the end of each session and module and at the conclusion of the programme. Feedback methods were communicated verbally at the end of each module/session to be completed online – all sessions currently taking place via MS Teams. Reassurance is given if there are any concerns relating to feedback forms to inform a Programme Officer and additional support is provided. All feedback is anonymous, and all users are aware of the Pharmacy Technician team generic email box to contact us, if not comfortable during the call to highlight concerns.

Learners are reassured that all feedback is read, considered, and acted upon, if appropriate.

2. Engaging with equalities groups

We actively collect feedback on equality, diversity and inclusion, at directorate level through a variety of mechanisms, including engagement with stakeholder groups, educational delivery and participation in project steering groups.

The findings are reviewed by our Equality & Human Rights Governance Group (EHRGG) (the successor to the Public Involvement, Equality & Diversity Network), which comprises representatives from each of our directorates, as part of an annual review of performance. Findings are used to identify priorities for action, including our operational planning targets and longer-term equality targets and mainstreaming priorities.

The case studies throughout this report illustrate how we engage with diverse stakeholders when developing our educational programmes and resources. The extent and impact of the diversity of this engagement is a focus of Equality & Human Rights Governance Group meetings and reviews, which seek to share intelligence and learning from programme and directorate-level feedback and engagement.

Our complaints log enables us to code complaints and concerns thematically as being relevant to equality and diversity at both directorate and corporate level. Complaints and concerns are reviewed annually by the EHRGG within the context of our equalities review, providing another source of data which can be triangulated to inform policy and strategy development and to measure our progress delivering our equality outcomes and equality mainstreaming priorities.

Directorates review feedback on accessibility and inclusion as part of their educational governance processes. Accessibility and inclusion are part of educational governance review for workstreams and at whole directorate level; this supports learning and improvement. For this reason, we aiming to develop new feedback tools that disaggregate the feedback from different groups to help us understand their experience of NES programmes and any specific barriers to inclusion. This is part of our commitment to inclusive learning as highlighted in NES's Inclusive Education and Learning Policy¹.

3. Supporting service users in providing feedback

Given the high value that we place on our service-user feedback, we encourage comment in a variety of ways (as described at 1.2 above). While there are no formal mechanisms for supporting the provision of feedback, we offer a wide range of access points for comment. These include generic mailboxes to provide named or anonymous feedback, online questionnaires or named contacts within each of our programme teams. We advertise the opportunity to provide comments on our products and services in our learning resources and websites, including the 'Contact Us' webpage on the NES corporate website. For all our trainee surveys, regular reminders are circulated to emphasise the importance of providing feedback. This is reflected in the high response rates from trainees.

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¹ Currently under review.

Case study: Pharmacy Additional Costs of Teaching

The Pharmacy Additional Costs of Teaching (ACT) team collects feedback data from colleagues at the Scottish Schools of Pharmacy and undergraduate pharmacy students undertaking experiential learning.

We collect feedback using the online Questback survey software and created QR codes to allow easier access on mobile devices rather than a link. We worked closely with colleagues at the Schools of Pharmacy to create communications to students and include as part of their end of placement task list. We communicated updates regularly to the Schools of Pharmacy ensuring that they had timely access to real-time data and response rates, which in turn facilitated regular reminders to students about the importance of their feedback. Production of a standardised 'student/facilitator chase' contributed to the 60% increase in response rates compared to 2020-21.

Case study 2 – Pharmacy Foundation Training Year (FTY)

After each block of the FTY curriculum delivery all learners provide feedback on their learning events. At the end of their 52 week training programme we request each trainee pharmacist to provide feedback on their experience of their training site, the support from their workplace colleagues and supervisor and on various aspects of the NES FTY programme. This includes the support provided by NES Pharmacy, Turas, and the learning events delivered within our curriculum. We also invite trainee pharmacist and designated supervisors within the FTY programme to contact us throughout the year with any feedback, comments, questions or concerns.

We encourage feedback regularly at the trainee pharmacists' learning events held throughout their training programme and regularly highlight the requirement to feedback via Questback as a standard part of participation in the programme. For the final questionnaire (Questback) we encourage participation via e-mail initially then by personal contact from our team. We include information on using Questback in our guidance and we introduce this at their induction webinars. It is discussed regularly at each learning event and we inform trainees that all feedback will be considered on an annual basis when we are developing the programme for future cohorts. We include information that the anonymised data will be used to feed into our quality management processes for training site approval.

4. Systems for collecting and using feedback, comments and concerns

NES employs a range of systems and processes for collecting and using feedback and comment from our service users as described in the case studies below. Following the move to technology enhanced modes of delivery during the Covid-19 pandemic, these systems often relate to the collection of feedback using online tools including Questback questionnaires and Microsoft Forms. These tools enable us to easily share examples and good practice between directorates and programme teams.

Case study - Optometry Continuing Professional Development

Our Optometry team currently seek feedback request following each CPD event, using an online questionnaire. We have reviewed our feedback questionnaires with the support of the

corporate Planning and Corporate Governance team to ensure they provide us with useful insight into the impact of our work. The questionnaires elicit an overall 'satisfaction' rating but also uses engagement measures such as willingness to recommend, as well as markers for confidence to apply learning, and indeed how much learning was new. Finally, we always ask for what other things the audience would like to see covered in our CPD delivery. With some projects we attempt to get information on previous development in the topic, and to gauge what 'next steps could look like.

5. Using feedback alongside other information to identify opportunities for improvement.

Feedback from trainees and other learners is one of many elements that contribute to quality improvement at NES. On occasions this feedback is a trigger for further investigation, as with the data from our trainee surveys. In other contexts, feedback is used as part of wider evaluations encompassing use of analytic data, peer review, site visits (now in virtual formats) etc. In our Dental and Medical directorates, feedback forms an important component Quality Management Framework and the annual process of reviewing all sources of data for Training Programmes as part of the monitoring process and to support decision making on any required Quality Management activities such as a Training Programme enquiry, training location visit etc.

Case study 1 – Dental Care Professions programme

The Dental Care Professional (DCP) workstream has responsibility for the delivery of preand post-registration educational opportunities for DCPs. In addition, the workstream provides training programmes for Dental Administrators/Receptionists and Dental Practice Managers to work towards achieving a formal qualification in their occupational field.

Learner feedback is collected from participants to ensure our educational support is valued, and subject to continuous improvement. Feedback from participants and employers, and reflection from workstream team is reviewed by local and national teams including a DCP Quality Management Group, and areas for improvement identified and actioned. We use feedback from QA visits – SQA External Verification, SDS Annual Quality Reports, GDC Programme Inspections and share such reports with DCP Quality Management Group for review and action, and across workstream.

Case study 2 – Clinical Psychology training

Psychology Clinical Practice teams are employed by NES and affiliated to University Programme partners. Their primary function is to support, manage and quality assure the practice placement element of Clinical psychology Training. Key tasks include the accreditation, monitoring and evaluation of practice placements and educators; identification of new placement opportunities; planning and supporting the clinical competence development of trainees; evaluating trainee progress both directly through examination of course work, placement documentation and reflective reports and indirectly through placement educator report; management of placement difficulties including supporting the development of supervision skills in placement educators. A number of these activities

involve improving the quality of placements and placement supervision on an ongoing basis. These include gathering and collating trainee evaluations and providing feedback to supervisors and their line managers about the quality of supervision and the placement environment and overseeing programmes of remediation where necessary.

Part 2. Complaints Performance Indicators

1. Learning from complaints (Indicator 1)

As in previous years, NES received a limited number of complaints or expressions of concern, but each one was used as an opportunity to learn and improve. Information about each complaint or expression of concern is held centrally by our Planning and Corporate Resources Team. Summaries of complaints received, timescales for investigation and outcomes are presented in Tables 1 and 2.

Table 1 above sets out the specific learning points and improvements made in response to complaints handled by the corporate Complaints Team in the Planning & Corporate Resources department. The table contains brief information about the responses to complaints, which range from reviews of process, to staff training and enhancements of communications practice. Enhancements were made or reviews conducted following complaints, including several where the complaint was not upheld, only partially upheld or where NES had no locus of responsibility. The outcomes of each complaint were reported to senior managers in the directorates subject to complaints with the expectation that recommendations would be taken forward.

A total of 13 complaints were handled by the corporate Complaints Team, with one further expressions of concern considered. These concerns were fully investigated and led to an apology or corrective action where NES was found to be at fault. Investigations of concerns do not lead to a final judgement.

2. Complaint process experience (Indicator 2)

Individuals and organisations dissatisfied with NES services or staff can communicate with us through a variety of routes. These include the Feedback, Comments, Concerns and Complaints mailbox on the NES corporate website, directly to the NES Chief Executive or Director of Planning by email or through local directorate staff, such as educational supervisors or quality management staff. The Medical Directorate also reviews expressions of concerns from medical trainees through its Notification of Concerns process. In addition to these processes, NES reviews the Care Opinion website, which is used by service users to comment and complain about health and care services. Although education and training was mentioned in some of these posts, there were no specific references to NES warranting investigation and response.

NES has a clear two-stage process for receiving and investigating complaints as set out in our <u>Complaints Procedure</u>, which may be accessed on the website. This explains our standards for investigating complaints, including the timescales for investigation and the support available to complainants. A report is produced for each complaint investigated by the corporate Complaints Team, which is presented using an agreed template. The report

summarises the complaint and sets out the evidence reviewed. It concludes with the final judgement which is supported by the investigating team's reasoning for its conclusions. Complainants are encouraged to provide feedback on their experience of the NES complaints investigation process, although no one took advantage of this opportunity during the year.

The request for feedback from complaint investigations invites complainants to comment on issues such as the time taken to conduct the investigation, the thoroughness of the investigation process, support provided by the Complaints Team and the clarity of the final report. None of the complainants in the reporting year took advantage of the opportunity to feedback comments and views about the complaint investigation process.

3. Staff awareness and training (Indicator 3)

Staff involved in complaints handling are trained in the principles and practice of effective complaints handling (including learning from complaints). Several NES staff have completed NES's own Complaints Handling online learning, which was developed to support the health and social care sectors in Scotland. All four members of our corporate Complaints Handling team (plus the Director of Planning and Corporate Resources who had executive responsibility for complaints during the year) hold the Level 5 Professional Award in Complaints Handling and Investigations awarded by Pearson.

Members of the corporate Complaints Team maintain their development and awareness of current practice in this aspect of their work through attendance at occasional events and reading reports from the Scottish Public Services Ombudsman and other authoritative sources of guidance.

4. Outcomes from complaints investigations (Indicators 4, 5, 6, 7, 8 and 9)

The outcomes from each of the complaint investigations conducted in 2021-2022 are summarised in Tables 2 to 5 below. This indicates that thirteen complaints were received during the year, plus a further expression of concern, which were investigated. None of the complaints received were whistleblowing cases.

Of the thirteen complaints received, two were upheld, three were partially upheld and four were not upheld. A further four complaints were reviewed but it was found that these did not relate to NES's activities. These complaints were referred to the organisations responsible.

Most complaint handling was conducted in accordance with the NHSS National Standards, including the timescales for acknowledging complaints, investigating complaints and reporting back to complainants with the complaint investigation outcomes. In one case an extension to the timescale for responding to a complaint was required in order to complete the investigation. The extension was required to schedule meetings with complainants and other individuals involved in the case. Complainants are kept informed about the progress of the investigation and any extensions required.

Tables 3 to 5 refer to Stage One and Stage Two complaints. Stage One complaints are those that are resolved locally. Stage Two complaints are referred (or 'escalated') to the corporate Complaints Team.

Table 2. Feedback, Comments, Concerns and Complaints Register - Year to 31 March 2022

Source (1)	Summary (2)	File Ref (3)	Is complaint suitable for frontline resolution?	Receipt Date	Acknowledged (A) and Response (R) Dates	Outcome (4)	Was complainant satisfied with frontline resolution?	Lessons Learned/Improvements (5)
Job applicant	Racial bias in recruitment process	20210430 Medical Recruitment	No – this was an escalation	30/04/21	30/04/21 30/06/22	Not upheld	No	- HR team to review pre- interview information shared. - Medicine & HR to review the ethnic disparities in medical educator recruitment. - HR to review the post- interview feedback given.
Specialty Doctor in Training	Inadequate allocation of medical training posts	20210618 Medical Training Post	Yes	18/06/21	18/06/21 22/06/21	Partially upheld	Unknown	Improvements made to the national recruitment process.
Member of public	Misspelt name	20210630 vaccination record correction	Yes	30/06/21	01/07/21 09/07/21	Not applicable	Unknown	Action taken – spelling corrected.

Source (1)	Summary (2)	File Ref (3)	Is complaint suitable for frontline resolution?	Receipt Date	Acknowledged (A) and Response (R) Dates	Outcome (4)	Was complainant satisfied with frontline resolution?	Lessons Learned/Improvements (5)
Member of public	Staffing at GP practice in Aberdeenshire	Multiple Dates GP Practice Aberdeen- shire	Yes	26/01/22	26/01/22 03/02/22	Not upheld	No	None
As above	As above	As above	No – escalated to Stage 2	Escalated 23/02/22	23/02/22 02/03/22	Not upheld	No	None
NHS Health Professional	Inaccurate content in NES resource	IPC Webinar Concern	Yes	04/07/21	06/07/21 28/07/21 and 10/08/21	Not applicable	Yes	Action taken – content removed from website
Doctor in Training	Concern: inadequate training & bullying culture	20210704 Ophthal- mology Training Concern	Yes	12/07/21	12/07/21 12/07/21	Not applicable	Not applicable	Concern: action taken over training. Signposted to local health board for bullying concerns.
Member of public	Incomplete vaccination record	20210730 vaccination record concern	Yes	30/07/21	30/07/21 02/08/21	Not applicable	Yes	Action taken and information corrected.
Dentist in training	Unfair Satisfactory Completion process	2021 December Dental NRP	No	21/12/21	21/12/21 31/01/22	Partially upheld	Not applicable	Dental to review assessment guidance issued; improvements to DAU processes; dental to consider establishing a

Source (1)	Summary (2)	File Ref (3)	Is complaint suitable for frontline resolution?	Receipt Date	Acknowledged (A) and Response (R) Dates	Outcome (4)	Was complainant satisfied with frontline resolution?	Lessons Learned/Improvements (5)
								formal appeals process for NRP outcomes.
Doctor in training	Specialty trainee recruitment	20210521 specialty trainee recruitment	Yes	20/05/21	20/05/21 02/06/21	Not applicable	Unknown	Signposted to appropriate national appeals process and given full background information.
Healthcare staff	Access to NES Training	20210603Acc ess to Dementia training	No	03/06/21	03/06/21 08/06/21	Fully upheld	Unknown	Improved communication and transparency about eligibility for training.
Healthcare staff	Shetland missing from promotional map	20211021 Scotland map	Yes	22/10/21	22/10/21 28/10/21	Fully upheld	Unknown	Apology given and liaison with Corporate Communication team to ensure correct graphic used in future.
Healthcare staff	Pharmacy application	20211121 Pharmacy application	Yes	19/11/21	22/11/21 23/11/21	Not upheld	Unknown	Clarification given.
Healthcare staff	Independent prescribing course	20211209 Pharmacy Training	Yes	09/12/21	10/12/21 20/12/21	Partially upheld	No	Apology and explanation given. Improvements made to the accessibility of materials.
Healthcare staff	Dental technology training	20221403 Dental HCS	Yes	14/03/22	14/03/22 17/03/22	Not upheld	Yes	Explanation and information given.

Source (1)	Summary (2)	File Ref (3)	Is complaint suitable for frontline resolution?	Receipt Date	Acknowledged (A) and Response (R) Dates	Outcome (4)	Was complainant satisfied with frontline resolution?	Learned/Improvements (5)
		Technology training						

NHS National Services Scotland (NSS) Guidance Notes:

- (1) Source: Indicate the status of the person e.g. "FYI Trainee", "External Contractors", "Educational Institution", "and Professional Organisation". For the purposes of logging, returns should be anonymous with the proviso that further information may be sought as necessary.
- (2) Summary: Provide a brief outline covering the core substance of the feedback indicating whether it is a comment, a concern or a complaint.
- (3) File Reference: Use your local identifier such that each case can be found as necessary.
- (4) Outcome: Indicate current status if the issue has not been resolved, or indicate, in the case of complaints, whether it has been upheld, partially upheld or rejected and the grounds for that outcome.
- (5) Improvements: Outline learning opportunities or improvements identified as a result of issue raised, either locally or corporately.

Table 3: Total number of complaints closed by NES during the period²

Number of complaints closed by the NHS Board	Number	As a % of all NHS Board complaints closed (not contractors)
Stage One	10	71.4
Stage two – non escalated	3	21.4
Stage two - escalated	1	7.1
Total complaints closed by NHS Board	14	100

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² Does not include expressions of concern.

Table 4. Stage One complaints by outcome

	Number	As a % of all complaints closed by NHS Board at stage one
Number of complaints upheld at stage one	1	10.0
Number of complaints not upheld at stage one	7 ³	70.0
Number of complaints partially upheld at stage one	2	20.0
Total stage one complaints outcomes	10	100

Table 5. Stage Two complaints by outcome (non-escalated)

Non-escalated complaints	Number	As a % of all complaints closed by NHS Boards at stage two
Number of non-escalated complaints upheld at stage two	2	100
Number of non-escalated complaints not upheld at stage two	-	-
Number of non-escalated complaints partially upheld at stage two	-	-
Total stage two, non-escalated complaints outcomes	2	100

Table 6. Stage Two complaints by outcome (escalated)

Escalated complaints	Number	As a % of all escalated complaints closed by NHS Boards at stage two
Number of escalated complaints upheld at stage two	0	-
Number of escalated complaints not upheld at stage two	2	100
Number of escalated complaints partially upheld at stage two	0	-
Total stage two escalated complaints outcomes	2	100

5. Accountability and Governance

This draft annual FCCC report is submitted to our Executive Team for comment and to the Education and Quality Committee for comment and approval. Recommendations arising

³ Includes four complaints unrelated to NES responsibilities, which were referred to other organisations.

from complaints are followed up by our corporate Complaints Team. The <u>annual report</u> is published on our website each year and sent to the Scottish Government and the Scottish Public Services Ombudsman (SPSO).

During the 1 April 2021 – 31 March 2022 period, the Education & Quality Committee (EQC) met regularly to monitor and quality assure our educational services and to record recommendations made as a result of feedback. A formal minute of EQC meetings was reported to the Board as a routine and regular agenda item.

Part 3. Positive feedback and compliments praise

While NES has no corporate or local systems specifically designed to elicit and report positive feedback and compliments from our service users. Despite this, we regularly receive endorsements of our work from a range of individuals and organisations. These are usually received through our processes for collecting feedback from learners and others, or through other quality management activities. On occasions we have received unprompted commendations as described in the examples below.

Case study 1: Clinical Psychology training

The following quote is from an Expert by Experience who support the Clinical Psychology training programmes as users of psychology services was involved in co-producing and co-delivering the Psychosocial Interventions in Psychosis modules and training events

'I was delighted as a person with lived experience to be part of this process. The actual inclusion within the team on the basis of quality of parity and esteem was very refreshing to note. It was also a revelation to have our concerns and thoughts listened to when we had a debrief and to be included in the development subject matter of what was to be taught.'

Case study 2: Optometry mandatory training

Optometrists and ophthalmic medical practitioners working under General Opthalmic Services in Scotland are required to undertake annual mandatory training. The following comments are from participants in this mandatory training:

'Effective optometry practice videos of situations where things can go wrong, it helped me understand watching it rather than reading it'.

'Very timely educational material considering current pressures on secondary care and increased management of more complex cases in practice'.

'Excellent mandatory exercise. I think this has probably been the most worthwhile of the mandatory training yet'.

Case study 3: NES Glaucoma Award Training (NESGAT)

NES offers a Scottish Government funded programme of accredited education and training in glaucoma management. The first group of Optometrists completing the programme completed their learning in April 2021. Participants have commended the programme as follows:

'I wasn't familiar with this method of learning, (I'm used to learning information for exams) however I feel I learned a lot more this way, submitting evidence and reflecting on real life patient examples This gave me far greater understanding and long term knowledge'.

'The hospital placements were super and a great learning experience. I really liked all the written learning material and videos within each module - the content was spot on and very engaging'.

'The online format made it much easier to attend (time and travel benefits). The programme was well planned and all the essential reading material and lectures being available on Moodle was great. Once the hospital placement started, everything started to click into place and stimulated further questions and study. The loan of a different type of goniolens was very helpful and being allowed to keep it was a nice treat. As I was behind the curve due to not having started my placement, I was contacted by a second tutor, this helped get me on track'.

Case study 4: Healthcare Sciences - Continuing Professional Development

Positive reactions of learners to Healthcare Science CPD courses were based around the fact that they find our e-learning modules accessible. They also liked the ability to work through them at their own pace. Likewise our interactive workshops (hosted on Microsoft Teams) seem to provide a format which is adaptive and inclusive, offering everyone the chance to participate in discussion regardless of any barriers in terms of technology or personality (e.g. anxiety). Some illustrative, anonymised quotes from evaluation forms for our Train-the-Trainer learning programme are as follows:

'The relaxed inclusive session reinforced my belief that every trainee learns differently and training and support must be tailored to the individual.'

'The variety of inputs; typing as well as speaking during questions ensured everyone with different style was given an opportunity to contribute.'

'I liked the interaction of everyone. It was a very open forum that we could discuss our experiences.'

Case study 5: Dental Care Professionals Training Programmes

NES offers a range of education programmes for Dental Care Professionals including the following staff groups:

- Pre-Registration Dental Nurse Training
- Orthodontic Therapy
- Dental Practice Management
- Medical & Dental Receptionists

Feedback on these programmes is routinely collected from learners and employers. The DCP also reviews the feedback from External Verifiers who are responsible for independent quality assurance of the SQA accredited programmes. Some of the positive feedback received from learners and employers is as follows:

Pre-Registration Dental Nurse Training - Learners' feedback (end of programme evaluation)

'I really enjoyed the course and it helped me to underpin the knowledge I needed to carry out my duties as I was training. All information was clear and tutors were always ready to help and answer questions'.

'The online lessons were set up well, you had a chance to chat to your tutors and classmates before the lesson started and afterwards too. You could unmute your microphone or type in the chat box and there was also a pen tool where you could tick yourself in for the morning. The information in the lessons was all relevant to the course and jam packed with information'.

'The course was very well delivered informative interesting and I would definitely recommend to other trainees. This was a truly brilliant and informative course. With the current situation they handled the online course brilliant and was very detailed with it'.

'New learning curve for everyone. This online course is very much one where you will get out what you put in. I really felt like I had a phenomenal experience and would recommend it to anyone wanting to pursue a career in dental nursing'.

Pre-Registration Dental Nurse Training - Employers' feedback from online evaluation:

My trainee required significant extra support and the APRs definitely gave a framework for positive action

I would think a blended model is appropriate moving forward. In the case of my trainee it removed a lot of the stress of travel and intimidation of big groups. This allowed her to contribute to discussions more.

Both of my trainees were unsure of how the programme would work at the start but quickly settled into it and found the sessions to be well run and presented, they felt they took away sufficient knowledge.

Orthodontic Therapy – Learners' Feedback - end of programme evaluation:

The staff involved in lectures and training sessions were excellent and really helped me develop my knowledge.

I have thoroughly enjoyed this course from start to finish. I felt the online study days were more productive than the in-house study days and also worked extremely well. I had full support from my tutor throughout and she was always there when needed. I have enjoyed the course & have felt very supported by my course leader

Practice Managers - Learners' Feedback - end of programme evaluation:

This programme will benefit a lot Practice Managers who are just starting their journey with this job role and I will recommend this course to other dental professionals when they will look for something more on dental field.

Feedback helped me identify the areas in which i could improve which is important to allow me to continue to develop within my role.

Further information

For further information about NHS Education for Scotland's processes and performance in collecting feedback and handling complaints please contact:

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To make a specific complaint or comment about any of our products and services please contact our corporate Complaints Team at: complaints@nhs.scot or use our Complaints@nhs.scot or use our Complaints@nhs.scot or use our Complaints@nhs.scot or use our <